

**UNITED STATE DISTRICT COURT
FOR THE DISTRICT OF MASSACHUSETTS
IN CLERKS OFFICE**

Albert William Bleau Jr.

Plaintiff

Vs.

Bridgewell, Inc. (Greater Lynn Mental Health
& Retardation Association), et al,

Defendants

2006 MAY 30 P 4: 29

U.S. DISTRICT COURT
DISTRICT OF MASS.

Civil Action
No. 04 – 10469REK

**Motion To Proceed Forma Pauperis In Appeal of the February 8,
2006 order of the Court Pursuant To Rule 24 (a) (1) (2) (3)**

Albert W. Bleau Jr., the plaintiff, respectfully requests to proceed Forma Pauperis.

Albert W. Bleau Jr., the plaintiff, is requesting that seven issues be considered by the US Circuit Court of Appeals:

1. Should the US District Court have granted the plaintiff's motion for reconsideration of the Court's October 25, 2005 Order?
2. Should the US District Court have granted the plaintiff's motion for reconsideration of the plaintiff's request for reconsideration of the February 8, 2006 Order?
3. Once the US District Court had received the plaintiff's motion for reconsideration February 7, 2006 requesting reconsideration, should the Circuit Court have amended or reversed its February 8, 2006 Order?
4. Did the plaintiff comply with Federal Rule 59 (e) in that he had found newly discovered evidence that was not easily obtainable that demonstrated fraud, misrepresentation and cover up by the defendants in the negotiation and

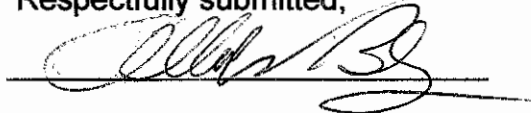
signing of the severance agreement?

5 Should the US District Court have granted the plaintiff's motions for summary judgment on plaintiff's claims under ADA, breach of contract and defamation?

6. Should special consideration of the rules be given to the plaintiff since he is a pro se plaintiff and has limited resources to investigate and conduct discovery and works full time in a non legal profession?

7. Should special consideration of the rules be given to the plaintiff to assure that justice is served and that the public interest is served?

Respectfully submitted,

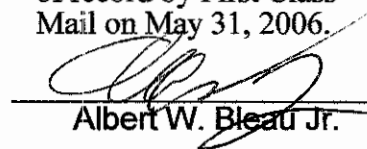


Albert W. Bleau Jr.
505 Paradise Rd. #208
Swampscott, MA 01907
(781) 962-2662

Dated: May 30, 2006

CERTIFICATE OF SERVICE

I hereby certify that a true copy of the above document was served upon all counsel of record by First Class Mail on May 31, 2006.


Albert W. Bleau Jr.

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FEDERAL RULES OF APPELLATE PROCEDURE

Form 4

Form 4. Affidavit Accompanying Motion for Permission to Appeal In Forma Pauperis

Form 4. Affidavit to Accompany Motion for Leave to Appeal in Forma Pauperis

United States District Court for the US District of Massachusetts

A.B., Plaintiff

Albert W. Blevins

v.

Case No. 10-10469 REK

C.D., Defendant

Bridgeway, Inc.
ET AL

Affidavit in Support of Motion	Instructions
I swear or affirm under penalty of perjury that, because of my poverty, I cannot prepay the docket fees of my appeal or post a bond for them. I believe I am entitled to redress. I swear or affirm under penalty of perjury under United States laws that my answers on this form are true and correct. (28 U.S.C. § 1746; 18 U.S.C. § 1621.)	Complete all questions in this application and then sign it. Do not leave any blanks: if the answer to a question is "0," "none," or "not applicable (N/A)," write in that response. If you need more space to answer a question or to explain your answer, attach a separate sheet of paper identified with your name, your case's docket number, and the question number.
Signed: <u>[Signature]</u>	Date: <u>5/30/06</u>

My issues on appeal are:

See Motion For Forma Pauperis

1. For both you and your spouse estimate the average amount of money received from each of the following sources during the past 12 months. Adjust any amount that was received weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate. Use gross amounts, that is, amounts before any deductions for taxes or otherwise.

Income source	Average monthly amount during the past 12 months		Amount expected next month	
	You	Spouse	You	Spouse
Employment	\$300	\$1,400	\$2,400	\$2,600
Self-employment	\$2,000	\$—	\$1,000	\$—
Income from real property (such as rental income)	\$—	\$—	\$—	\$—
Interest and dividends	\$—	\$—	\$—	\$—
Gifts	\$—	\$—	\$—	\$—
Alimony	\$—	\$—	\$—	\$—
Child support	\$—	\$—	\$—	\$—
Retirement (such as social security, pensions, annuities, insurance)	\$—	\$—	\$—	\$—
Disability (such as social security, insurance payments)	\$—	\$—	\$—	\$—
Unemployment payments	\$—	\$300	\$—	\$—
Public assistance (such as welfare)	\$—	\$—	\$—	\$—
Other (specify):	\$—	\$—	\$—	\$—
Total monthly income:	\$2,300	\$1,700	\$3,400	\$2,600

Form 4**FEDERAL RULES OF APPELLATE PROCEDURE****48**

2. List your employment history for the past two years, most recent employer first. (Gross monthly pay is before taxes or other deductions.)

Employer	Address	Dates of employment	Gross monthly pay
Harcourt & Apis	746 Ely St.	4/1/06 - Present	\$2500

3. List your spouse's employment history for the past two years, most recent employer first. (Gross monthly pay is before taxes or other deductions.)

Employer	Address	Dates of employment	Gross monthly pay
Peaks Island Inn	Peaks Is.	8/05 - Present	\$1200 - Average
Lutheran Social Sec. W. P. Brown	W. P. Brown	12/03 - 8/05	\$2,300

4. How much cash do you and your spouse have? \$ 0

Below, state any money you or your spouse have in bank accounts or in any other financial institution.

Financial institution	Type of account	Amount you have	Amount your spouse has
No Bank Acct		\$ 0	\$
Keys BK		\$	\$500 on LPS -

If you are a prisoner seeking to appeal a judgment in a civil action or proceeding, you must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.

5. List the assets, and their values, which you own or your spouse owns. Do not list clothing and ordinary household furnishings.

Home	(Value)	Other real estate	(Value)	Motor vehicle #1	(Value)
		Condo	\$50,000	Make & year: 1987	
		in Finland		Model: Porsche	
		Mort. Loan	\$30,000	Registration #: TO Pats	
Motor vehicle #2	(Value)	Other assets	(Value)	Other assets	(Value)
Make & year: 1992		1997		Furnishings	
Model: Honda Civic		Ford Expedition			
Registration #: M1NNA		7887 TA			

6. State every person, business, or organization owing you or your spouse money, and the amount owed.

Person owing you or your spouse money	Amount owed to you	Amount owed to your spouse
Woodford's Family Services	\$500	-
Elliot Coal Co.	\$320	-

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FEDERAL RULES OF APPELLATE PROCEDURE

Form 4

7. State the persons who rely on you or your spouse for support.

Name	Relationship	Age
Monique Blair	Daughter	14
Michelle Blair	Daughter	19

8. Estimate the average monthly expenses of you and your family. Show separately the amounts paid by your spouse. Adjust any payments that are made weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate.

	You	Your Spouse
Rent or home-mortgage payment (include lot rented for mobile home)	\$ 1100	\$
Are real-estate taxes included? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Is property insurance included? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ 400	\$
Home maintenance (repairs and upkeep)	\$ 100	\$
Food	\$ 800	\$ 50
Clothing	\$ 50	\$ 50
Laundry and dry-cleaning	\$ 20	\$
Medical and dental expenses	\$ 100	\$
Transportation (not including motor vehicle payments)	\$	\$
Recreation, entertainment, newspapers, magazines, etc.	\$	\$
Insurance (not deducted from wages or included in mortgage payments)	\$	\$
Homeowner's or renter's	\$ 25	\$
Life	\$ 6	\$ 65
Health	\$	\$
Motor Vehicle	\$ 200	\$ 80
Other:	\$	\$
Taxes (not deducted from wages or included in mortgage payments) (specify):	\$	\$
Installment payments	\$	\$
Motor Vehicle	\$	\$
Credit card (name):	\$	\$ 400
Department store (name):	\$	\$
Other: Bank loans	\$	\$ 1000
Alimony, maintenance, and support paid to others	\$ 615	\$
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$	\$
Other (specify):	\$	\$
Total monthly expenses:	\$ 4410	\$ 6595

Form 4

FEDERAL RULES OF APPELLATE PROCEDURE

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9. Do you expect any major changes to your monthly income or expenses or in your assets or liabilities during the next 12 months?

☐ Yes ☒ No If yes, describe on an attached sheet.

10. Have you paid — or will you be paying — an attorney any money for services in connection with this case, including the completion of this form? ☐ Yes ☒ No

If yes, how much? \$ _____

If yes, state the attorney's name, address, and telephone number:

11. Have you paid — or will you be paying — anyone other than an attorney (such as a paralegal or a typist) any money for services in connection with this case, including the completion of this form?

☐ Yes ☒ No

If yes, how much? \$ _____

If yes, state the person's name, address, and telephone number:

12. Provide any other information that will help explain why you cannot pay the docket fees for your appeal.

*we barely make it month to month
I currently have \$2,000 in unpaid bills
& over \$5,000 in unpaid alimony*

13. State the address of your legal residence.

*60 R Humphrey St
Sunderland, MA 01967*

Your daytime phone number: *781 962-2662*

Your age: *62* Your years of schooling: *10*

Your social-security number: *01 32 6783*

(As amended Apr. 24, 1998, eff. Dec. 1, 1998.)